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UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

U.S. PTO

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Attomey Docket No.	00862.023547	2.S 48	.
First Name	d Inventor or Application Identifier	82	
HIROSHI TOJO ET AL.		287	
Express Mail Label No.		97	

APPLICATION ELEMENTS			Mail Stop Pa	atent Application	
See MPEP chapter 600 concerning utility patent application contents.		ADDR	ADDRESS TO: Commissioner for Patents P.O. Box 1450		
				VA 22313-1450	
1. Fee Transmittal Form		7.	CD-ROM or CD-R in duplicate, la		
(Submit an original, and a duplicate for fee pr	ocessing)	••	Program (Appendix)	arge table of Computer	
2. Applicant claims small entity status. See 37 CFR 1.27.		8.	Nucleotide and/or Amino Acid Se (if applicable, all necessary)	equence Submission	
3. X Specification Total Page	ges 63		a. Computer Readable F	Form (CRF)	
4. X Drawing(s) (35 USC 113) Total Sh	eets 23		b. Specification Sequence Listini. CD-ROM or CD-R (2		
5. X Oath or Declaration Total Page	ges 2		ii. paper	, ,	
a. X Newly executed (original or o	ору)			dentity of above copies	
	/07 OFD / 00/ !!!		ACCOMPANYING APPLICAT	TION PARTS	
b. Copy from a prior application (for continuation/divisional with		9. X	Assignment Papers (cover sheet & d	document(s))	
i. <u>DELETION OF INN</u> Signed Statement att		10.	37 CFR 3.73(b) Statement (when there is an assignee)	Power of Attorney	
inventor(s) named in 37 CFR 1.63(d)(2) ar	the prior application, s	see 11.	English Translation Document (ii	if applicable)	
6. X Application Data Sheet. See 37 CFR 1	.76	12.	Information Disclosure Statement (IDS)/PTO-1449	Copies of IDS Citations	
		13.	Preliminary Amendment		
		14. X	Return Receipt Postcard (MPEP (Should be specifically itemized)	? 503))	
		15.	Certified Copy of Priority Docum (if foreign priority is claimed)	nent(s)	
		16.	Other:		
·					
17. If a CONTINUING APPLICATION, check app	propriate box and su	upply the requisite	information:		
Continuation Divisional Prior application information: Examiner	Continua	ation-in-part (CIP)	of prior application No/ Group/Art Unit:		
For CONTINUATION OR DIVISIONAL APPS only: The considered a part of the disclosure of the accompanyin					
be relied upon when a portion has been inadvertently of					
	18. CORRES	SPONDENCE ADD	RESS		
X Customer Number or Bar Code Label	(Insert Customer No.	05514 or Attach bar code	abel here) or Correspo	ondence address below	
NAME					
Address		-			
City	State	<u> </u>	Zip Code		
Country	Telephone		Fax		

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	19-20 =	0	X \$ 18.00 =	\$0
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	3-3 =	0	X \$ 86.00 =	\$0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))		\$290.00 =	\$0	
		·		BASIC FEE (37 CFR 1.16(a))	\$770.00
		-176	Total of	above Calculations =	770.00
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	1.27, 1.28).	0
				TOTAL =	\$770.00
19. Sn a.		ntity statement is enclosed			
a. b. c. 20.	A small er A small er and desire Is no long X A check in the amo	ntity statement was filed in ed. er claimed. eunt of \$770.00 to the total tota	n the prior nonprovisional o cover the filing fee is a to cover the recordal fe	enclosed. ee is enclosed.	:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Leonard P. Diana (Reg. No. 29,296)	
SIGNATURE	bul ?. Diane	
DATE	April 20, 2004	

Form #125 NYMAIN422866